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DO NOT LEAVE ANY ITEMS BLANK

## SURROGATE'S COURT OF THE STATE OF NEW YORK

COUNTY OF MONROE

----- X

ADMINISTRATION PROCEEDING,

Estate of Daniel Prude

a/k/a

Deceased

PETITION FOR LETTERS OF:

☒ Administration☐ Limited Administration☐ Administration with Limitations☐ Temporary Administration

File No. \_\_\_\_\_

----- X

TO THE SURROGATE'S COURT, COUNTY OF MONROE

It is respectfully alleged:

1. The name, domicile and interest in this proceeding of the petitioner, who is of full age, is as follows:

Name: Tameshay PrudeDomicile: 8102 South Loomis Blvd., Apt. 1  
(Street Address)Chicago  
(City/Town/Village)CookIllinois60620312-837-8100

(County)

(State)

(Zip)

(Telephone Number)

Mailing address is: \_\_\_\_\_  
(If different from domicile)

Citizenship (check one):

☒ U.S.A. ☐ Other (specify) \_\_\_\_\_

Interest of Petitioner (check one):

☐ Distributee of decedent (state relationship) \_\_\_\_\_☒ Other (specify) Sister of decedent; daughter of sole distribute (decedent's father)

Is proposed Administrator an attorney?

☐ Yes ☒ No

[If yes, submit statement pursuant to 22 NYCRR 207.16(e); see also 207.52 (Accounting of attorney-fiduciary).]

The proposed Administrator  
ineligible, pursuant to SCPA 707 to receive letters.☐ is ☒ is not a convicted felon nor is he/she otherwise

If the proposed Administrator is a convicted felon, submit a copy of the Certificate of Relief from Civil Disabilities.

2. The name, domicile, date and place of death, and national citizenship of the above-named decedent are as follows:

[The Death Certificate must be filed with this proceeding. If the decedent's domicile is different from that shown on the death certificate, check box ☐ and attach an affidavit explaining the reason for this inconsistency.]Name: Daniel Terrell PrudeDomicile: 8102 South Loomis Blvd., Apt. 1  
(Street Number)Chicago  
(City/Village/Town)Illinois60620

(State)

(Zip Code)

Township of: \_\_\_\_\_ County of: Monroe CookDate of Death: March 30, 2020 Place of Death: Rochester, New YorkCitizenship: (check one): ☒ U.S.A. ☐ Other (specify) \_\_\_\_\_

[Note: For Items 3a through c: Do not include any assets that are jointly held, held in trust for another, or have a named beneficiary.]

3.(a) The estimated gross value of the decedent's personal property passing by intestacy is less than

\$ 0

(b) The estimated gross value of the decedent's real property, in this state, which is ☐ improved, ☐ unimproved, passing by intestacy is less than

\$ 0

A brief description of each parcel is as follows:

(c) The estimated gross rent for a period of eighteen (18) months is the sum of \$ 0

(d) In addition to the value of the personal property stated in paragraph (3) the following right of action existed on behalf of the decedent and survived his/her death, or is granted to the administrator of the decedent by special provision of law, and it is impractical to give a bond sufficient to cover the probable amount to be recovered the rein: **[Write "NONE" or state briefly the cause of action and the person against whom it exists, including names and carrier].**

### Potential wrongful death lawsuit.

(e) If decedent is survived by a spouse and a parent, or parents but no issue, and there is a claim for wrongful death, check here ☒ and furnish names(s) and address(es) of parent(s) in Paragraph 7. See EPTL5-4.4.

4. A diligent search and inquiry, including a search of any safe deposit box, has been made for a will of the decedent and none has been found. Petitioner(s)(has)(have) been unable to obtain any information concerning any will of the decedent and therefore allege(s), upon information and belief, that the decedent died without leaving any last will.

5. A search of the records of this Court shows that no application has ever been made for letters of administration upon the estate of the decedent or for the probate of a will of the decedent, and your petitioner is informed and verily believes that no such application ever has been made to the Surrogate's Court of any other county of this state.

6. The decedent left surviving the following who would inherit his/her estate pursuant to EPTL4-1.1 and 4-1.2:

- a. ☐ Spouse(husband/wife).
- b. ☐ Child or children or descendants of predeceased child or children. **[Must include marital, nonmarital and adopted].**
- c. ☐ Any issue of the decedent adopted by persons related to the decedent (DRLSection117).
- d. ☒ Mother/Father.
- e. ☐ Sisters or brothers, either of whole or half blood, and issue of predeceased sisters or brothers.
- f. ☐ Grandmother/Grandfather.
- g. ☐ Aunts or uncles, and children of predeceased aunts and uncles (first cousins).
- h. ☐ First cousins once removed (children of first cousins).

**[Information is required only as to those classes of surviving relatives who would take the property of decedent pursuant to EPTL4-1.1.State "number" of survivors in each class. Insert "No" in all prior classes. Insert "X" in all subsequent classes].**

7. The decedent left surviving the following distributees, or other necessary parties, whose names, degrees of relationship, domiciles, post office address and citizenship are as follows:

[Note: Show clearly how each person is related to decedent. If relationship is through an ancestor who is deceased, give name, date of death, and relationship of the ancestor to the decedent. Use rider sheet if space in paragraph (7) is not sufficient. See Uniform Rules 207.16(b).

If any person listed in paragraph(7)is a non-marital person, or descended from an on marital person, attach a copy of the order affiliation or Schedule A. If any person listed in paragraph (7) was adopted by any persons related by blood or marriage to decedent or descended from such persons, attach Schedule B].

7a. The following are of full age and under no disability:[If non-marital or adopted-out person, so indicate by attaching Schedule A and/or B]

Name	Relationship	Domicile and Mailing Address	Citizenship Mailing Address
Joe Louis Cole	Father	8102 S. Loomis Blvd, Apt 1	United States
		Chicago, IL 60620	
Dorothy Jean Prude	Mother	Deceased, Jan. 16, 2009	

7b. The following are infants and/or persons under disability: [Attach applicable Schedule A, B, C, and/or D]

Name	Relationship	Domicile and Mailing Address	Citizenship Mailing Address

8 There are no outstanding debts or funeral expenses, except: [Write "NONE" or state same]

NONE

9. There are no other persons interested in this proceeding other than those here in before mentioned.

WHEREFORE, your petitioner respectfully prays that: [Check and complete all relief requested]

( ) a. process issue to all necessary parties to show cause why letters should not be issued as requested;

(x) b. an order be granted dispensing with service of process upon those persons named in Paragraph(7) who have a right to letters prior or equal to that of the person nominated, and who are non-domiciliaries or whose names or whereabouts are unknown and cannot be ascertained;

(X) c. a decree award Letters of:

[ X ] Administration to Tameshay Prude

[ ] Limited Administration to \_\_\_\_\_

[ ] Administration with Limitation to \_\_\_\_\_

[ ] Temporary Administration to \_\_\_\_\_

or to such other person or persons having a prior right as may be entitled thereto, and;

( ) d. That the authority of the representative under the forgoing Letters be limited with respect to the prosecution or enforcement of a cause of action on behalf of the estate, as follows: the administrator(s) may not enforce a judgment or receive any funds without further order of the Surrogate.

( ) e. That the authority of the representative under the foregoing Letters be limited as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( ) f. [State any other relief requested.] \_\_\_\_\_

Dated: 7/21/2020

1. Tameshay Prude

(Signature of Petitioner)

Tameshay Prude

(Print Name)

2. \_\_\_\_\_

(Signature of Petitioner)

\_\_\_\_\_

(Print Name)

SURROGATE'S COURT OF THE STATE OF NEW YORK COUNTY OF

-----X

ADMINISTRATION PROCEEDING

Estate of Daniel T. Prude,

WAIVER OF CITATION,

RENUNCIATION AND CONSENT TO

APPOINTMENT OF ADMINISTRATOR

(INDIVIDUAL)

a/k/a

Deceased. File No. \_\_\_\_\_

-----X

The undersigned, a distributee or creditor of the above named decedent and being of full age and sound mind hereby voluntarily appears in the Surrogate's Court of Monroe \_\_\_\_\_ County, New York and waives the issuance and service of citation in this matter, renounces all right to Letters of Administration of the above captioned estate and consents that

[ X ] Letters of Administration

[ ] Letters of Administration with Limitations

[ ] Limited Letters of Administration

be issued to Tameshay Prude

or any other person or persons entitled thereto without any notice whatsoever to the undersigned, and consents

[ X ] that a bond be dispensed with and hereby specifically release any claim I might have under any bond that may be filed [ ] that a bond in the amount of \$ \_\_\_\_\_ be posted.

7-21-2020 Joe Louis Cole 8102 S Loomis Father  
 Date Signature Street Address Relationship  
Joe Louis Cole Chicago IL 60620  
 Print Name Town/State/Zip

STATE OF NEW YORK

COUNTY OF Monroe ss.:On July 21, 20 20, before me personally appeared Joe Louis Cole

to me known and known to me to be the person described in and who executed the foregoing waiver and consent and each duly acknowledged the execution thereof.

Jennifer M. Sommers  
 Notary Public  
 Commission Expires:  
 (Affix Stamp or Seal)

Elliot Shields, Roth &amp; Roth LLP

Name of Attorney

192 Lexington Ave. Suite 802

New York, New York 10016

Address

212-425-1020

Telephone Number

A-8

JENNIFER M. SOMMERS  
 Notary Public, State of New York  
 No. 02SO5076289  
 Qualified in Monroe County  
 Commission Expires  
 July 1, 2023

## COMBINED VERIFICATION, OATH AND DESIGNATION

[For use when petitioner is an individual]

STATE OF NEW YORK \_\_\_\_\_)

COUNTY OF MONROE \_\_\_\_\_) ss.: \_\_\_\_\_

The undersigned, the petitioner named in the foregoing petition, being duly sworn, says:

1. VERIFICATION: I have read the foregoing petition subscribed by me and know the contents thereof, and the same is true of my own knowledge, except as to the matters therein stated to be alleged upon information and belief, and as to those matters I believe it to be true.

2. OATH OF ☐ EXECUTOR ☒ ADMINISTRATOR c.i.a. ☐ TRUSTEE as indicated above: I am over eighteen (18) years of age, and I will well, faithfully and honestly discharge the duties of Fiduciary of the goods, chattels and credits of said decedent according to law. I am not ineligible, pursuant to SCPA 707, to receive letters and will duly account for all moneys and other property that will come into my hands.

3. DESIGNATION OF CLERK FOR SERVICE OF PROCESS: I hereby designate the Clerk of the Surrogate's Court of MONROE County, and his/her successor in office, as a person on whom service of any process, issuing from such Court may be made in like manner and with like effect as if it were served personally upon me, whenever I cannot be found and served within the State of New York after due diligence used.

My domicile is: 8102 South Loomis Blvd., Apt. 1 Chicago IL 60620  
(Street Address) (City/Town/Village) (State) (Zip)

Tamasha Prude  
(Signature of Petitioner)

Tamasha Prude  
(Print Name)

On August 20<sup>th</sup>, 2020, before me personally came

Tamasha Prude

to me known to be the person described in and who executed the foregoing instrument. Such person duly swore to such instrument before me and duly acknowledged that he/she executed the same.

Notary Public: [Signature]

Commission Expires: 10-23-2023

(Affix Notary Stamp or Seal)

Signature of Attorney: \_\_\_\_\_

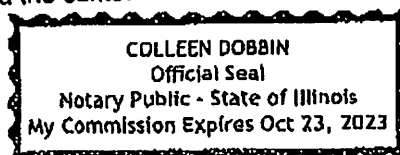
Print Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Email: \_\_\_\_\_

Address of Attorney: \_\_\_\_\_

Tel No.: \_\_\_\_\_



Attention: Flint Shields

